POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		7117	7/-1
FORMALITY REVIEW	H-5	995	7-16-1
HESPONSE FORMALITY REVIEW			<u> </u>

## INDEX OF CLAIMS

	Rejected	N.	Non-elected
	Allowed	Ĭ.	Interference
	(Through numeral) Canceled		Appeal
-	Restricted		Objected

	÷		0		
Claim	Date	Claim	Date	Claim	Date
Claim		<u>a</u>		Final	
Original Conginal		Final		Final	11111
	++++	51		101	
2		52		102	<del>                                     </del>
3		53		104	<del></del>
(4)		54	<del>                                     </del>	105	+++++
. 5		56	+++++	106	
<u>(6)</u>		57	+++++	107	
(2)- (0)		58		108	
9		59		109	<del>                                     </del>
10		60		110	<del></del>
11111111		61		111	+++
12		62	<del></del>	113	+++++
13 0		63	+++++	114	+-+-+-
14 0		65	+-+-+-	115	
15 7 V O	<del></del>	66		116	
16		67		117	
18		68		118	
19	<del>- - - - - - - - - - - - - - - - - - - </del>	69		119	<del></del>
20	+++++	70		120	
21	++++	71		121	<del></del>
22		72		122	<del></del>
23		73		124	╌┼╾┼╾┼╾┼
24		74	+++++	125	<del></del>
25		75 76	<del></del>	126	
26		77		127	
27	<del></del>	78		128	
28	+++++	79		129	
30		80		130	
31		81		131	<del></del>
32		82		133	
. 33		83	<del>▗</del> <del>▗</del> <del></del> <del></del>	134	
34		84 85	<del></del>	135	
35		86		136	
36	<del>╒╃╺┋</del> ╌┼╌┼╌┼╌┼╌┼	87		137	
38	<del></del>	88		138	
39		89		139	
40		90		140	
41		91		141	
42		92		142	
43		93	<del></del>	143	+++++
44		94		144	<del>┤┋</del> ╃┈┼┈┼┈┼┈┤
45		95		146	++++
46	<del>                                     </del>	96		147	
47	<del>                                     </del>	98	<del>┡╺┋</del> ╌╄╌╬╌╬	148	
48	<del>-                                    </del>	99	<del>                                     </del>	149	
49	1 1 1 1 1 1 1 1	100	; ; ; ; <del></del>	1150	1 1 1 1 1 1 1

If more than 150 claims or 10 actions staple additional sheet here